

# EXHIBIT 10

\\ PFG New Accounts - Friday, July 10, 2009								
Lookup	Checklist	Cust. Info	GMI Search	Notes	Tracking	Last 250 Signed	Last 100	
Traders Challenge:		Not Linked to Accounts	Linked to Accounts					
<b>Information</b>								
Account Reference: [REDACTED] 1954								
<a href="#">Printer Friendly Version</a> <b>Account Information</b>								
Date Submitted:	7/7/2009 1:38:56 PM							
IP address:	84.253.16.150							
Office - Account Number:	F - FQ562							
Broker:	Bruce Pollack							
Account Doc. Version:	v 2.0.0508							
Account Type:	Individual, Speculative							
Trade FOREX:	yes							
Managed Account:	no							
Trading System Used:	no							
Account Name:	James Pieron							
Account Address:	Zurich, Non-U.S. 8006							
Account Phone:	+ [REDACTED] 2400							
Account Email:	jp@jdfx.com							
Email Statements:	Yes							
<b>Customer Information</b>								
Name:	Mr. James Pieron							
DOB:	10/1/1969							
Address:	[REDACTED]							
Home Phone:	Zurich, Non-U.S. 8006							
Work Phone:	[REDACTED]							
Cell Phone:	none given							
U.S. Citizen:	no							
Country:	Switzerland							
Social Security #:	The SSID							
Marital Status:	single							
# of Dependents:	0							
Employer:	JDFX							
Years there:	7							
Nature of Business:	FX							
Position Held:	CEO							
Employer Telephone:	+41763622400							
Employer Address:	Uetlibergstrasse 9 CH-8001 Zurich							
<b>Financial Information</b>								
Annual Income:	over \$100,000							
Net Worth:	over \$100,000							
Liquid Net Worth:	over \$50,000							
Have you ever declared bankruptcy?	no							
Other PFG Accounts:	no							
NFA, NASD, CFTC, or NFA member:	no							
Previous Experience								
Stocks/Bonds:	no							
Commodities:	no							
Options:	no							

Mutual Funds:	<i>no</i>
FOREX:	<i>yes</i>
Investment Objective:	<i>Speculation</i>
Understand Risk of Loss:	<i>yes</i>
Control Person (SEC Rule 144):	<i>no</i>
Company Name:	
Trading Symbol:	
Principal Bank Reference:	<i>Karin Bannettier, UBS , Zurich</i>

Have you ever been party to an investigation, complaint, or settlement with the NFA, CFTC, SEC, or other?

*no*

Do you have a pending complaint, or have you ever made a complaint, regarding a past commodity futures or securities account?

*no*

**Additional Documents**

I have read the following Documents:

**Risk Disclosure**

Customer Agreement:	<i>I agree to all of the terms of the Customer Agreement.</i>
Foreign Currency Transaction Notice:	<i>I agree to all of the terms of the Foreign Currency Transaction Notice.</i>
Jurisdiction and Venue Provisions:	<i>I agree to all of the terms of the Jurisdiction and Venue Provisions.</i>
Risk Disclosure:	<i>I understand the Risk Disclosure.</i>
SFP Disclosure:	<i>I understand the SFP Disclosure.</i>

e-sign: James Pieron  
date: 07/07/2009

Additional Info [Show/Hide]:

[Contact the Webmaster](#)

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Traders Challenge: Not Linked to Accounts		Linked to Accounts					
<p><b>Checklist For:</b> [REDACTED] <b>1954</b></p> <p><b>Office: F Account:</b> [REDACTED]</p> <p>Account Title: James Pieron Account Type: Individual, Speculative</p> <p>Broker: Bruce Pollack Sales Series: 181 RT Comm: FX</p> <p>Managed Account: no Managed By: [REDACTED]</p> <p><b>CDC Check:</b> Name: Stacey Magnesson Date: 7/8/2009</p> <p><b>NFA Check:</b> Name: [REDACTED] Date: [REDACTED] yes <input type="checkbox"/> no <input checked="" type="checkbox"/> If yes: [REDACTED]</p> <p><b>Final Reviews:</b> New Accounts Associate: Angelica Ernst Date: 7/10/2009</p> <p><b>Statement Setup Beta:</b> <i>Submit Customer to Statements Systems</i> BOSS: Not Submitted Statements: Not Submitted NOTE: Only accounts administered before 9/17/2008 will show an accurate response. Accounts administered before that time could have been submitted but may not show an accurate status.</p> <p><b>Manager Approval:</b> New Account Manager: [REDACTED] Date: [REDACTED] DSFP: [REDACTED] Date: [REDACTED]</p> <p style="text-align: center;"><input type="button" value="Update"/></p>							

*Contact the Webmaster*

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07 Jul 2009 20:34

JDFX

P. 1

Peregrine Financial Group  
190 S. LaSalle Street 7<sup>th</sup> Floor  
Chicago, IL 60603

To: The New Accounts Department

This letter will confirm that I/we do not solicit any customer funds. I/we are using our own funds to trade this account.

7-JUL-09  
Date

JAMES PIERON  
Print Name  


JAMES PIERON  
Print Name  


ATTN: MEREDITH PARIZEK

CID: 

PFG000511

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P.3

**W-8BEN**(Rev. February 2006)  
Department of the Treasury  
Internal Revenue Service**Certificate of Foreign Status of Beneficial Owner  
for United States Tax Withholding**

OMB No. 1545-1621

► Section references are to the Internal Revenue Code. ► See separate instructions.  
► Give this form to the withholding agent or payer. Do not send to the IRS.

Do not use this form for:

- A U.S. citizen or other U.S. person, including a resident alien individual
- A person claiming that income is effectively connected with the conduct of a trade or business in the United States
- A foreign partnership, a foreign simple trust, or a foreign grantor trust (see instructions for exceptions)
- A foreign government, international organization, foreign central bank of issue, foreign tax-exempt organization, foreign private foundation, or government of a U.S. possession that received effectively connected income or that is claiming the applicability of section(s) 116(c), 501(c), 892, 895, or 1443(b) (see instructions)

Note: These entities should use Form W-8BEN if they are claiming treaty benefits or are providing the form only to claim they are a foreign person exempt from backup withholding.

- A person acting as an intermediary

Note: See instructions for additional exceptions.

Instead, use Form:  
W-9

W-8ECI

W-8ECI or W-BIMY

W-BECI or W-BEXP

W-BIMY

**Part I Identification of Beneficial Owner (See Instructions.)**

1 Name of individual or organization that is the beneficial owner <b>James Pieron</b>	2 Country of incorporation or organization <b>Switzerland</b>
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3 Type of beneficial owner:	<input checked="" type="checkbox"/> Individual	<input type="checkbox"/> Corporation	<input type="checkbox"/> Disregarded entity	<input type="checkbox"/> Partnership	<input type="checkbox"/> Simple trust
	<input type="checkbox"/> Grantor trust	<input type="checkbox"/> Complex trust	<input type="checkbox"/> Estate	<input type="checkbox"/> Government	<input type="checkbox"/> International organization
	<input type="checkbox"/> Central bank of issue	<input type="checkbox"/> Tax-exempt organization	<input type="checkbox"/> Private foundation		

4 Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address.

City or town, state or province. Include postal code where appropriate. <b>CH-8006, Zurich</b>	Country (do not abbreviate) <b>Switzerland</b>
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5 Mailing address (if different from above)

City or town, state or province. Include postal code where appropriate.	Country (do not abbreviate)
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6 U.S. taxpayer identification number, if required (see instructions)	<input type="checkbox"/> SSN or ITIN	<input type="checkbox"/> EIN	7 Foreign tax identifying number, if any (optional)
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8 Reference number(s) (see instructions)

**Part II Claim of Tax Treaty Benefits (if applicable)****9 I certify that (check all that apply):**

- a  The beneficial owner is a resident of **Switzerland** within the meaning of the income tax treaty between the United States and that country.
- b  If required, the U.S. taxpayer identification number is stated on line 6 (see instructions).
- c  The beneficial owner is not an individual, derives the item (or items) of income for which the treaty benefits are claimed, and, if applicable, meets the requirements of the treaty provision dealing with limitation on benefits (see instructions).
- d  The beneficial owner is not an individual, is claiming treaty benefits for dividends received from a foreign corporation or interest from a U.S. trade or business of a foreign corporation, and meets qualified resident status (see instructions).
- e  The beneficial owner is related to the person obligated to pay the income within the meaning of section 287(b) or 707(b), and will file Form 8833 if the amount subject to withholding received during a calendar year exceeds, in the aggregate, \$600,000.

10 Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article ..... of the treaty identified on line 8a above to claim a ..... % rate of withholding on (specify type of income): ..... Explain the reasons the beneficial owner meets the terms of the treaty article: .....

**Part III Notional Principal Contracts**

11  I have provided or will provide a statement that identifies those notional principal contracts from which the income is not effectively connected with the conduct of a trade or business in the United States. I agree to update this statement as required.

**Part IV Certification**

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:

1 I am the beneficial owner (or am authorized to sign for the beneficial owner) of all the income to which this form relates.

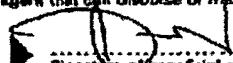
2 The beneficial owner is not a U.S. person.

3 The income to which this form relates is (a) not effectively connected with the conduct of a trade or business in the United States, (b) effectively connected but is not subject to tax under an income tax treaty, or (c) the partner's share of a partnership's effectively connected income, and

4 For broker transactions or broker exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner.

Sign Here



Signature of beneficial owner (or individual authorized to sign for beneficial owner)

7-22-09

Date (MM-DD-YYYY)

Capacity in which acting

For Paperwork Reduction Act Notice, see separate instructions.

Cut. No. 26047Z

Form **W-8BEN** (Rev. 2-2006)

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